FNLCR Resources to Support Extramural Research

James H. Doroshow, M.D.

Director, Division of Cancer Treatment and Diagnosis

National Cancer Institute, NIH

Bethesda, Maryland



FNLCR Advisory Committee

Research Resources for Extramural Investigators at FNLCR

Biopharmaceutical Development Program

Patient Derived Models Repository

Mission: "Our goal is the rapid translation of innovative scientific discoveries into therapeutic products that hold the real hope for preventing and curing cancer and other diseases."



DCTD established the BDP in 1993 to:



- Provide specialized technical expertise and services to develop biotechnology products
- Conduct feasibility testing and develop new manufacturing processes and analytical test methods to support clinical use
- Manufacture GMP-grade biopharmaceuticals for early stage clinical trials
- Provide USFDA and international regulatory documentation and support
- Transfer technology to commercial entities
- Educate the extramural community by providing standardized documents and training

Profile of BDP Projects



Common hurdles:

- Intended for orphan indications, unmet medical needs, limited markets
- Involve novel, high-risk/high-reward technology; many types of biologicals
- May have regulatory uncertainty (e.g. first-in-class products)
- Allow project originators to retain Intellectual Property rights
- Process development, manufacturing, fill/finish, QC, QA, regulatory

Sources of projects:

- NCI Experimental Therapeutics program (NExT) for extramural community
- NCI CCR: Intramural projects
- NIH Institutes such as NIAID and NCATS
- Other federal agencies such as DoD under Economy in Government Act
- Collaborative Research and Development Agreements (CRADAs) between NCI and private industry

Upstream: Fermenters and Bioreactors



Eukaryotic and Prokaryotic Production Systems



A variety of different-sized fermenters and bioreactors are used for process development and GMP production







150-L and 500-L fermenters can produce up to 500 grams of raw product



1000-L bioreactor for cell suspension; yields of up to 300 grams of raw product

Downstream: Purification and Fill/Finish



Purification is usually via column chromatography:



Chromatography Skid with Product and Buffers (bags) and Column

Final product is filled by hand (small lots) or by machine:







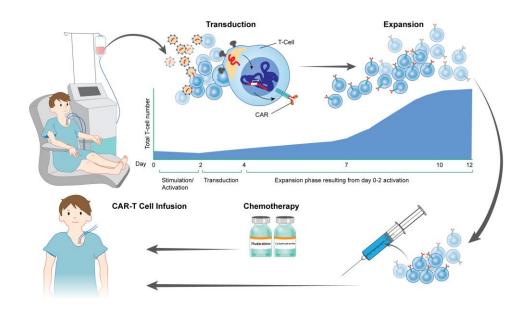
A semi-automatic vial filling machine

Recently Expanded Capabilities: Autologous Cell Therapy Manufacturing



Autologous products require raw material (apheresis) and product chain logistics: cryopreservation, scheduling manufacturing, chain of custody.





Clinical Trial	Sponsor
Phase 1/2 Study of Anti-CD33 Chimeric Antigen Receptor Expressing T-Cells (CD33CART) in Children and Young Adults with Relapsed/Refractory AML	Pediatric Blood & Marrow Transplant Consortium (PBMTC)
GD2-CAR PERSIST: Production and Engineering of GD2-Targeted, Receptor Modified T Cells for Sarcoma and Neuroblastoma to Increase Systemic Tumor Exposure	NCI/CTEP Pediatric Cancer Immunotherapy Trials Network (PED-CITN)

BDP Has Developed Many Types of Products



- Monoclonal Antibodies 26
- Recombinant Proteins/Natural Products – 5
- Immunotoxins 4
- Immunomodulators 17
- Oncolytic Viruses 10
 - AdV Type 5
 - HSV
 - Measles Virus
 - Poliovirus
 - Vaccinia
- Virus Vectors 4
 - AAV Types 2 and 9
 - Lentivirus
 - Retrovirus (in development)

- Cell Therapy Products 2
- Vaccines: Cancer 16Infectious disease 9
 - Peptide
 - Oligonucleotide
 - Viral VEE, EBV, MVA
 - Recombinant protein
 - Plasmid
 - Adsorbed
 - Cellular

Productivity Summary for Life of Program:

- > 250 product lots released for clinical use
- > 130 distinct products manufactured
- > 60 products have been or are in human clinical trials
- > 14 products are being readied for licensure
- 2 products are licensed and commercially available

Currently, 21 products under active IND

Ch14.18 Monoclonal Antibody



- ch14.18 is a monoclonal antibody that targets the GD2 receptor on the surface of neuroblastoma cells.
- The NCI Children's Oncology Group (COG) performed a clinical trial led by Dr. Alice Yu at UCSD in children with high-risk neuroblastoma. The trial showed improved progression-free survival (58%->73%) when ch14.18 together with cytokines IL-2 and GM-CSF were added to the standard treatment regimen.
 - Yu, A.L., A.L. Gilman, M.F. Ozkaynak, et al. (2010). Anti-GD2 antibody with GM-CSF, interleukin-2, and isotretinoin for neuroblastoma. N Engl J Med. 363:1324-1334.
- The BDP developed the manufacturing process for ch14.18 and manufactured the national supply for clinical trials in the USA, Canada, Australia, and New Zealand.
- The product, Unituxin (dinutuximab), is now available commercially.



Products in Commercial Development



Ad-delta24/RGD (DNX-2401) - Genetically modified adenovirus for treatment of Rb pathway-defective cancers

- The BDP developed the manufacturing and analytical processes to generate clinical supplies for the Phase 1 study at MD Anderson
- Granted FDA Fast-track and Orphan Drug status in 2014; currently in Phase 2 clinical development
- Licensed to DNAtrix in 2014

<u>Tet-CMV (PepVax)</u> – Peptide vaccine to prevent CMV recurrence in HCT patients

- The BDP contracted peptide synthesis, and developed stable formulation and analytic assays supporting clinical trials for Phase 1 and 2
- Licensed to Helocyte (formerly DiaVax) in 2016

<u>Ch11-1F4 (CAEL-101)</u> – Monoclonal antibody targeting amyloid fibrils for imaging and immune-mediated clearance of Primary Amyloidosis

- The BDP Developed manufacturing process, assays, clinical supplies for Phase 1 imaging trial and Phase 1 therapeutic trial
- Orphan drug designation in April 2017
- Phase 2 trial in progress 2020; Licensed as imaging/therapeutic agent to Caelum 2017







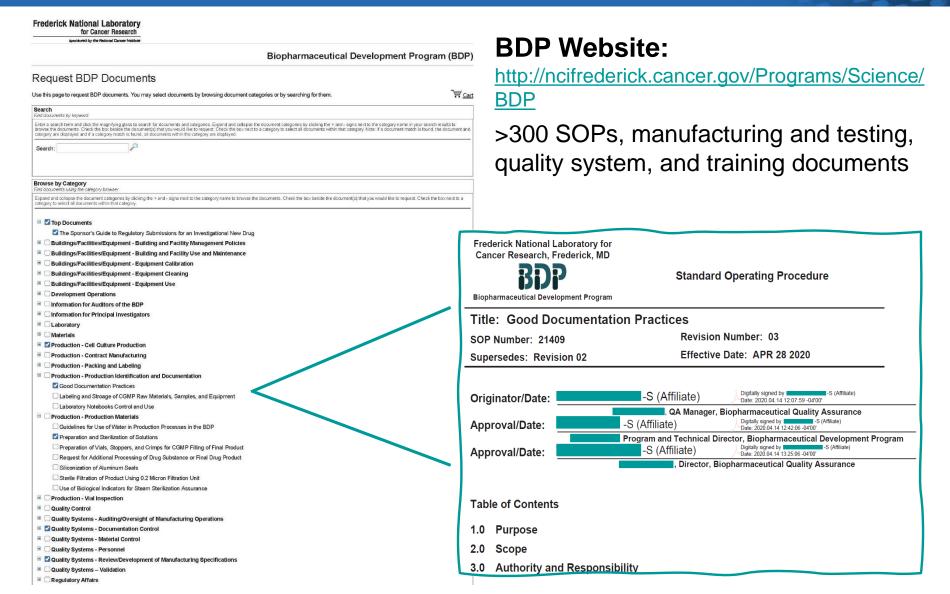
Supporting Other Institutes: NCATS, NIAID, NIDDK, and DOD

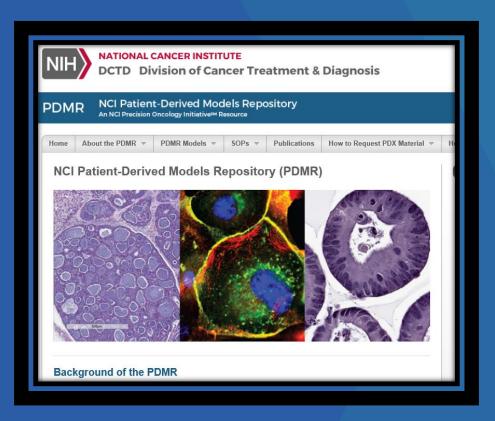


- RLIP76: Radical ion transporter protein for Acute Radiation Syndrome (NCATS, co-sponsored by NIAID)
 - ✓ BDP process development improved the final product purity from ~40% to >95%
- AGIL-AADC: AAV-based gene therapy for the treatment of Rare Disease Aromatic L-amino acid Decarboxylase (AADC) deficiency (NCATS)
 - ✓ BDP expanded capabilities to include Adeno-associated Virus vectors
- GP-350- and gH/gL/gp42-Ferritin nanoparticles; Vaccine for Epstein Barr Virus (NIAID, Co-sponsored by NCI)
 - ✓ BDP developed production and purification process for multi-component vaccine
- Transmission-blocking Malaria Vaccine and Conjugated Carrier Protein EPA (NIAID)
 - ✓ BDP expanded capabilities to include *Picchia*-based production
- IL-2Fc and mutlL15-Fc for treatment of Type I diabetes (NIDDK)
- Multiple DOD projects

Providing Expertise and Resources: Documents and Training







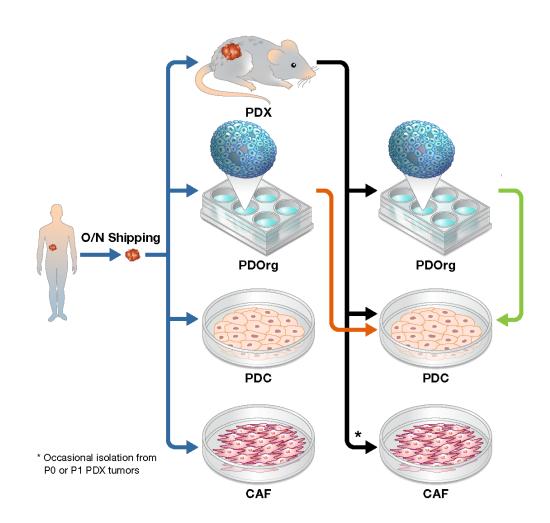
The National Cancer Institute Patient Derived Models Repository (PDMR) An NCI Precision Oncology InitiativeSM Resource

https://pdmr.cancer.gov



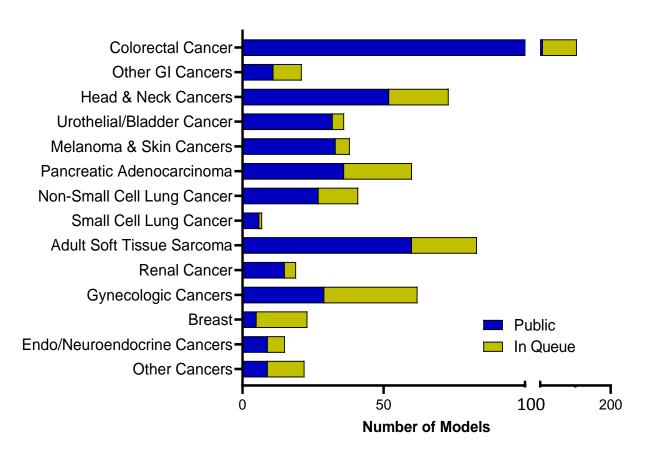
NCI's Patient-Derived Models Repository (PDMR)

- A national repository of Patient-Derived Models (PDMs) to serve as a resource for academic discovery efforts and public-private partnerships for drug discovery
- Clinically-annotated & early-passage models with comprehensive molecular-characterization and quality control metrics
- Complement existing PDM collections and focus on under-represented model types such as rare cancers and models representing racial and ethnic minorities
- Provide models to the research community at a modest cost compared to other distributors
- Provide all related metadata including: deidentified patient clinical history and outcomes, model histology, WES and RNASeq of models, and SOPs through a public website: https://pdmr.cancer.gov



Patient-Derived Xenograft (PDX) Models Available Across Solid Tumor Histologies





- 429 Public models. 223 additional models in Final QC (going through pathology, NGS, STR, regrowth from freeze); Median Passage =2
- Clinically-annotated, early-passage, molecularlycharacterized patient-derived models
- Complement existing PDX collections and focus on under-represented model types such as rare cancers and models representing racial and ethnic minorities
- Provide all related metadata and SOPs through a public website
- Current distribution within the US (pdmr.cancer.gov).
 - ✓ Model information also available through PDX Finder at <u>www.pdxfinder.org</u>
- Specimens are from patients with both primary and metastatic disease from treatment naïve to heavily pre-treated

Rare Cancer Histologies Available

- Merkel Cell Carcinoma
- Mesothelioma
- Hurthle Cell Neoplasm of the Thyroid
- Malig. Periph. Nerve Sheath Tumor
- Salivary Gland SCC
- Pharyngeal SCC
- Nasopharyngeal SCC
- Laryngeal SCC
- Carcinosarcoma of the Uterus
- Vaginal Cancer
- Cervical SCC

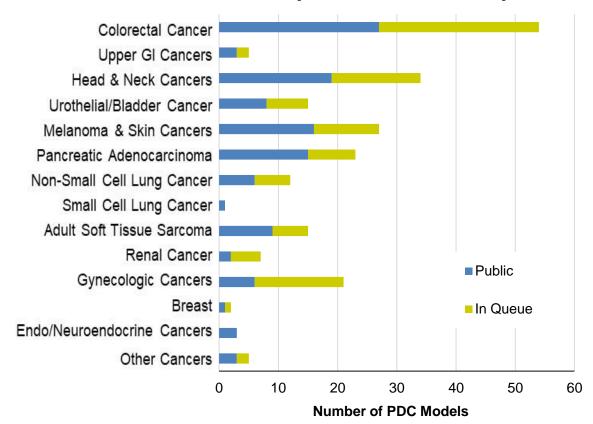
- Synovial Sarcoma
- Liposarcoma
- Leiomyosarcoma uterine and nonuterine
- Rhabdomyosarcoma
- Osteosarcoma
- Chondrosarcoma
- Malignant fibrous histiocytoma
- Fibrosarcoma not infantile
- Ewing sarcoma/Peripheral PNET

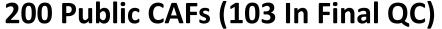


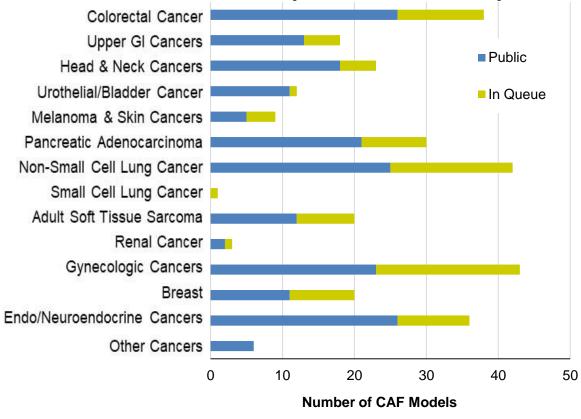
Patient-Derived Cancer Cell Lines (PDCs) and Cancer Associated Fibroblast Cultures (CAFs)



119 Public PDCs (105 In Final QC)





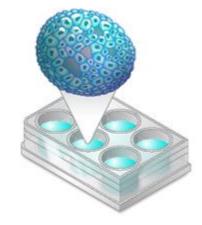


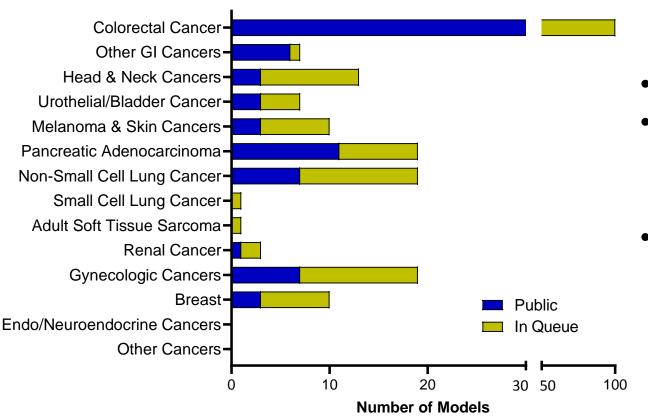
- Adherent & Suspension Cultures
- · Requires use of defined media

21	Median Passage	14
12	Min Passage	9
51	Max Passage	34

- Not Transformed
- Limited Lifespan
- Requires use of defined media

Patient-Derived Organoids (PDOrg)





Requires use of defined media

- 88 Public models, 123 in Final QC
- Goal: Wherever possible develop a PDX, 2D in vitro PDC, and PDOrg culture for comparative preclinical studies
- Provide all related metadata and SOPs through the PDMR website and public database: <u>pdmr.cancer.gov</u>

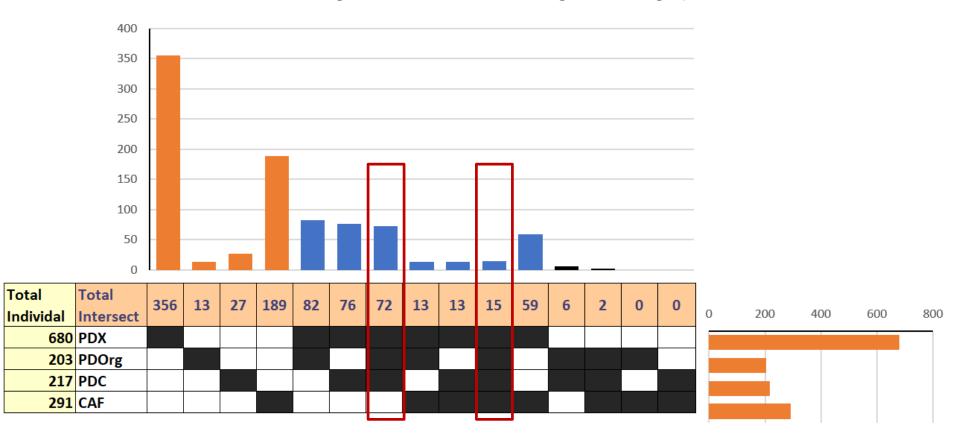
Median Passage	11
Min Passage	4
Max Passage	39

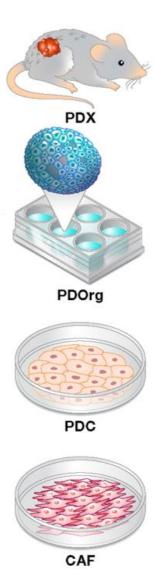
Matched PDX, PDOrg, PDC, and CAF Models

Includes models that are either

 Publicly Available or going through final QC for Public release (pathology confirmation of all contributing material, NGS, STR, regrowth from cryopreservation, etc)

87 models with PDX, PDOrg, & PDC for mid/high-throughput translational screening

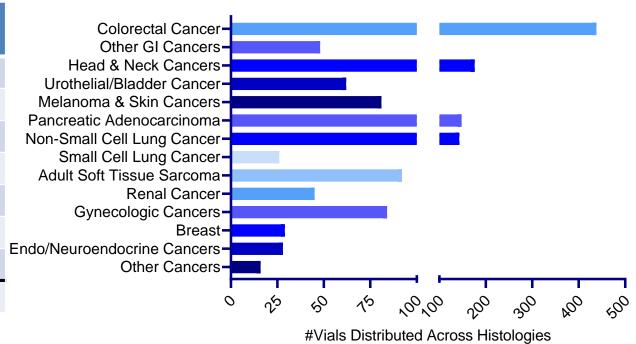




Distribution of Models to the Public

Academic, Commercial, and Intramural

Material	Number of Vials Distributed
PDX Fragments – Viably Cryopreserved	555
DNA from PDX Fragment (Solution)	13
RNA from PDX Fragment (Solution)	28
Fresh-Frozen PDX Fragment for Extraction	457
In Vitro PDCs – Viably Cryopreserved	252
In Vitro CAFs – Viably Cryopreserved	22
PDOrgs – Viably Cryopreserved	89
TOTAL	1416



USES:

- ✓ Academic preclinical core services
- ✓ Commercial investigational agent validation
- ✓ Target-specific inhibitors matched to molecular phenotypes
- ✓ Small molecule agents
- ✓ Methylome assessment

- ✓ Tumor microenvironment
- ✓ Small animal imaging studies
- ✓ Biomarker assessment matched to molecular phenotypes
- ✓ Angiogenesis
- ✓ Proteogenomics
- √ Radio-therapy

Institutions/Companies Receiving PDMR Resources

Academic/Non-for Profit

Augusta University *

Brown University

Cleveland Clinic

Dartmouth College

Emory University

Georgetown University

Harvard University (Boston Children's Hospital)

Harvard University (Massachusetts General Hospital) *

Houston Methodist Research Institute (Weill-Cornell

Medicine)

Indiana University

Johns Hopkins University * †

MD Anderson Cancer Center * †

Mount Sinai (Icahn School of Medicine)

Ohio State University * †

Roswell Park Cancer Institute

Saint Louis University

San Diego State University

Stanford University *

The Wistar Institute

Thomas Jefferson University †

University of California, Irvine *

University of California, San Francisco

University of California, Los Angeles * †

University of California, Davis

University of Georgia

University of Maryland †

University of Miami

University of Michigan * †

University of Pittsburgh *

University of South Alabama

University of Southern California (Keck Medicine)

University of Tennessee

University of Texas, Dallas

University of Texas, Southwestern

University of Washington (Fred Hutchinson Cancer

Research Center) * †

University of Wisconsin, Madison (Morgridge Institute)

Virginia Commonwealth University *

Wake Forest University *

Washington University

Center for Cancer Research, NCI * †

Division of Cancer Epidemiology and Genetics, NCI

Division of Cancer Treatment and Diagnosis, NCI * †

Frederick National Laboratory for Cancer Research * †

National Center for Advancing Translational Sciences

(NCATS), NIH

Biotech/Pharma

AstraZeneca

Chimera Bioengineering

Dicerna Pharmaceuticals, Inc

GlaxoSmithKline

Kenjockety Biotechnology

Merrimack Pharmaceuticals *

Orphagen Pharmaceuticals

SRI International

* Multiple PI's have requested material

† The same PI has made >1 request

Continuing to communicate regularly to extramural Pl's to enhance awareness

Ongoing Efforts

- Proteomic and Phospho-proteomic analysis of PDMR, CPTAC
- Planning PDX Tissue MicroArray (TMA) Panels
- HLA-Typing of all PDX models
- Collaboration with Tempus, Inc.
 - ✓ Exchange Organoid models and test with same drugs other site has experience to compare reproducibility of preclinical response across sites
- Performing preclinical studies with matched PDMR PDXs and Organoid to assess consistency of response in models from the same patient

Questions?